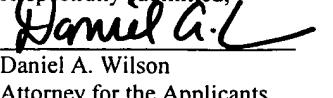
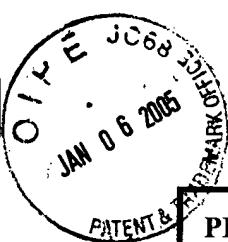
 FEE TRANSMITTAL FY 2005		<i>Complete if Known</i>																																																																																													
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Direct all correspondence to:		<p>Respectfully submitted,  Daniel A. Wilson Attorney for the Applicants Testa, Hurwitz & Thibeault, LLP High Street Tower-125 High Street Boston, MA 02110 Tel. No.: (617) 248-7226 Fax No.: (617) 248-7100</p>																																																																																													
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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Attorney Docket Number UDL-004D2																														
In re Application of Horvath <i>et al.</i>																																
Application Serial No. 10/705,446																																
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<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response in the above entitled application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows (check time period desired)</p> <table><tr><td><input type="checkbox"/></td><td>One month (37 CFR 1.17(a)(1))</td><td>\$</td></tr><tr><td><input checked="" type="checkbox"/></td><td>Two months (37 CFR 1.17(a)(2))</td><td>\$ 450.00</td></tr><tr><td><input type="checkbox"/></td><td>Three months (37 CFR 1.17(a)(3))</td><td>\$</td></tr><tr><td><input type="checkbox"/></td><td>Four months (37 CFR 1.17(a)(4))</td><td>\$</td></tr><tr><td><input type="checkbox"/></td><td>Five months (37 CFR 1.17(a)(5))</td><td>\$</td></tr><tr><td><input type="checkbox"/></td><td>Applicant claims small entity status under 37 CFR 1.27, therefore the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____.</td><td></td></tr><tr><td><input checked="" type="checkbox"/></td><td>A check in the amount of the fee is enclosed.</td><td></td></tr><tr><td><input type="checkbox"/></td><td>The Commissioner is hereby authorized to charge the required fee to Deposit Account No. 20-0531. Enclosed is a duplicate of this sheet.</td><td></td></tr><tr><td><input checked="" type="checkbox"/></td><td>The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment, to Deposit Account No. 20-0531.</td><td></td></tr><tr><td><input checked="" type="checkbox"/></td><td>Return receipt postcard enclosed.</td><td></td></tr></table> <p>I am the <input type="checkbox"/> assignee of record of the entire interest. <input type="checkbox"/> applicant. <input checked="" type="checkbox"/> attorney or agent of record. <input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a). _____.</p>			<input type="checkbox"/>	One month (37 CFR 1.17(a)(1))	\$	<input checked="" type="checkbox"/>	Two months (37 CFR 1.17(a)(2))	\$ 450.00	<input type="checkbox"/>	Three months (37 CFR 1.17(a)(3))	\$	<input type="checkbox"/>	Four months (37 CFR 1.17(a)(4))	\$	<input type="checkbox"/>	Five months (37 CFR 1.17(a)(5))	\$	<input type="checkbox"/>	Applicant claims small entity status under 37 CFR 1.27, therefore the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____.		<input checked="" type="checkbox"/>	A check in the amount of the fee is enclosed.		<input type="checkbox"/>	The Commissioner is hereby authorized to charge the required fee to Deposit Account No. 20-0531. Enclosed is a duplicate of this sheet.		<input checked="" type="checkbox"/>	The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment, to Deposit Account No. 20-0531.		<input checked="" type="checkbox"/>	Return receipt postcard enclosed.	
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